

AMENDED CLAIMS					
	NO. OF CLAIMS	HIGHEST NO. OF CLAIMS PREVIOUSLY PAID FOR	EXTRA CLAIMS	RATE	ADDT'L FEE
Total Claims	49	MINUS 20 =	29	x \$18.00 =	\$522.00
Independent Claims	1	MINUS 3 =	0	x \$78.00 =	
If Amendment adds multiple dependent claims, add \$260.00					
Total Amendment Fee					522.00
If small entity status is claimed, subtract 50% of Total Amendment Fee					
TOTAL ADDITIONAL FEE DUE FOR THIS AMENDMENT					\$522.00

- A claim fee in the amount of \$ 522.00 is enclosed.
 Charge \$ _____ to Deposit Account No. 02-4800.

The Commissioner is hereby authorized to charge any appropriate fees under 37 C.F.R. §§ 1.16, 1.17 and 1.21 that may be required by this paper, and to credit any overpayment, to Deposit Account No. 02-4800. This paper is submitted in triplicate.

Respectfully submitted,

BURNS, DOANE, SWECKER & MATHIS, L.L.P.

By: Robin L. Teskin

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Date: March 4, 1999